File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



A ETHICS AND

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

2008 JAN 24 AM II: 07

COMMITTEE NAME (Must be same as on Statement of Orga	, v				
Napello Co. Republican Cent	val Committee	1 1	FORM		
IMPORTANT: Indicate by # type of committee you are reporting for:	4	1 1	DR-2 DISCLOSUI	RE	
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) (4) County Central Committee (5) County Candidate (6) City Candi	date (7) School Board or Other Politics	a '	ev. 07/2007) REPORT		
Subdivision Candidate (8) County PAC (9) City PAC (10) School E 11) Local Ballot Issue	Board or Other Political Subdivision PAC	; (<u> Fo</u>	r Office Use Only	2	
CANDIDATE COMMITTEES ONLY:		=	mm. # C 1/8=	<u> </u>	
Candidate Name	Political Party (if applicable)	1 1	gged In 3		
	, (, т.р., т.е.,		anned		
Office Sought	District (if Senate or House)	1 1	mputerdited		
Late reports are subject to possible civil and criminal penalties. Pu	rsuant to Iowa Code sections 68B.32	4(7) and 68A	x.401(3), the candidate, for a		
H. A M	() \ / = = =		1 1		
17 Mmitel Free	(641)682-\$1291		1/19/2008		
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE SIGNED		
IAM FILINGA Oan. 19th					
/)	REPORT FOR (1) ELECTION		LECTION YEAR.		
(Veport date)	Indicate by	# 2			
CHECK IF AMENDMENT TO REPORT DATED		Local Comm	ittees, enter Date of Election		
☐ Check if this is final (termination) report and attach Notice o	f Dissalution Farms DD 0				
(You must continue to file reports until a DR-3 is filed.)	County & Lo	cal Committees, enter County	in	
	,	WINCH Election	on is neid		
STATEMENT OF CASH ON HAND)				
CASH ON HAND at the beginning of the reporting period. (Tol					
committee. This amount MUST be the same as the c	ash on hand at the end		1/2 22		
of the last reporting period or must be zero if this is fir	st report filed.)	\$	183.83		
ADD TOTAL MONEY TAKEN IN THIS PERIOD			1 0 0 0		
Schedule A: Cash Contributions total (Attach Schedu	ile A) (*also see in-kind below)		1,972.01		
Schedule F: Loans Received total (Attach Schedule	F)				
Schedule H: Total Sales of Campaign Property (Attac	ch Schedule H)				
(Schedule H applies to Candidates' Comm	nittees Only)			i	
	SUB-TOTAL	\$	<u>2,155.84</u>	<u></u>	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD					
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).		$\frac{927.73}{}$	3	
Schedule F: Loan Repayments total (Attach Schedule	e F)				
CASH ON HAND at the end of this reporting period (if final repo	ort balance must be zero)	\$	1,228.1	1	
**UNPAID BILLS (From Schedule D - Attach Schedule D)		¢			
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched			-		
**OUTSTANDING LOANS (From Schedule F - Attach Schedule					
CONSULTANT BREAKDOWN (Schedule G Attached?)	⊌ t j		VEC Y NO		
,			YES X NO		
ANDIDATE COMMITTEES ONLY:					
·	ch Schodulo H)	•	·		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attac		\$		-	

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE

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(Rev. 07/03)

CHECK THIS BOX IF

AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

NUNLLUS CO. Rumi hali (an (anto))

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	1 7
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK	I WILL WILL PRESIDENCE OF CONTINED TOX	TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR FUND-
L	NUMBER		(if applicable)		RAISER INCOME
4/21	ID#				
4/3/07	CK#	uniterized cash		\$ 11.16	
101	ID#			16	
14/21		Max Von Schrader, gr. 405 Golf Ave.		200	
T/3/07	CK#	Otturna, IA SZSDI	-	200	
	ID#	Gary Wates			
4/3/	CK#	Prop18A		1000	$ \checkmark $
107	ID#	Othunna, IN S2501		1000	
4/3/00	,,	Libera Carlson			
lon	CK#	Naples, FL 34109		10000	
41	ID#	Interstate Power; Light		100	
1/3/m	CK#	Box soun		756	
/ /	ID#	Dubuque IA 52004			
43/07		Harold BeBuhr		ØC)	
707	CK#	402 Cong Dr. OHumura, IN SZEDI		1000	
4	ID#	Karl Gilbertson		,,,,,	
113/00	CK#	1609 Rainbar Dr.		2500	
[0.]	ID#	Ordan Falls, IA 50613			
14/21		Paul Messeri		. (70)	
17/07	CK#	04121 No. Em Otherma IA 52501		10000	
14	ID#	Ted Haas			
M3/20	CK#	1550 No. Van Bruser		1000	
107	ID#	OTUMBO IN SUSOI		100-	
14/21		TRUCK Cavinoss 2851 Oak Mendowbr.		البو	
107	CK#			10000	
<u> </u>		CHI MING LIT 52001	SUB-TOTAL	0112 20	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of ____

TOTAL (if last page of this schedule)

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE	
A (Rev. 07/03)	MONETARY RECEIPTS
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AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

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DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	DEL ATIONIO UE		
RECEIVED	(if applicable)	TANKE AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR FUND-
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)		RAISER
1L	ID#	1-500100-210	<u> </u>		INCOME
7/3/		Walter Zloger 1607 No. Elm St.		\$	
100	CK#			1000	
	ID#	Otherwa, IA 52501		100	
14/21		Dr. Joyce Vista-Warne 713 Edwards Dr		עשפט י	
13/97	CK#			\()()=	
	ID#	Ottumua, M S2501			
5/1	0.411)		2 81	
11/00	CK#	uniternized cash		30	
	ID#	David Hester			
6/5/00	CK#	313 16 165		00	
/on	CN#	312 Varness		100-	
101	ID#	Otherwa Th 52501		100	
4/5/00	CK#	Leon Vaughn 238 N. Golf		L 62	. /
107	CN#	Otherwa, IA 5250,	<u> </u>	50	
61.	ID#				
101	CK#	Helena McFarland 404 E. Williams		1000	
107	CK#	Ottumus TH SZSOI		109	
101	ID#	Paul Clark			<u> </u>
6/5/00	CK#	209 No Sheridan		7-00	
70.1	010#	Ottumua DA SEGO,		25	
61	ID#	Densel Shelton			
6/5/00	CK#	114 So. Adella		1,00	
100		Ottumua, IA SZSEI		HU=	
61	ID#	Jerry Kjer			
6/5/00	CK#	" Bedicier Estates		- CO	
100		Othurnua DA S2001		20-	————
6/-1	ID#	Randy Davis			
151 1	CK#	1935 OFTERWOOD Dr		0000	$ \vee $
/on		Otherwa, It S250;		25~	
			SUB-TOTAL	.620.01	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

TOTAL (if last page of this schedule)

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form.	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
		CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION DISCLOSURE BOARD.

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DATE	PAC ID NUMBER	NAME AND ADDRESS OF COLUMN			
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
11	ID#				INCOME
15/07	CK#	unitemized cash		\$ 8co	
Ι σι '	ID#	uniterized cash		 	
115/07	CK# —	(Declaration Celebration)		7639	
81 , '	ID#				<u> </u>
18/07	CK# —	uniterrized cash		300	
C/I	ID#	Milian Lotte Miller-Merks			
8/8/09	CK#	Muhannotte Miller-Meeks 11674 90th Street Ottammer In 52501		20000	
V ,	ID#	J.B. Bluck			
8/8/07	CK# —	J.B. Black 1268 W. Second St. Otherwa, DA 52501		5000	
91	ID#	DeanFrantz			
9/13/59	СК#	Oftenwa, Ith Szeri		2500	
	ID#	10000 1			
91,3100	СК# —	unitemized cash		3672	
10) .	ID#	Glenn Nitzche			
10/5/07	CK#	33 Schwartz Dr. Ottumua, IA Szon	_	25°	
101	ID#	Phil Mathias			
10/5/07	CK#	19033 37TL Otherwa Th 52501		2500	
	ID#	Lisa Smith			
10/5/on	CK#	724 Othmwa St Othmwa IA 52501		1500	
		111 72301	SUB-TOTAL	1	
				\$464.11	

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Page 3 of 4

TOTAL (if last page of this schedule)

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form MONETARY (Rev. 07/03) **RECEIPTS** CHECK THIS BOX IF AMENDING FORM

SCHEDULE

COMMITTEE NAME (Must be same as on Statement of Organization) entral Committe

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

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DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	ASSOLISIT	T
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER		TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10/s/on	ID# CK#	(Tailgate Party) Uniternized cash		\$ 9,00	4
12/3/07	ID# CK#	uniterized cash		1800	
12/13/07	ID# CK#	uniterized cash		2000	
1/07-to 12/07	ID# CK#	unterized cash interest earned		H ³⁷	
	CK#			•	
	ID# CK#			,	
	ID# CK#				
	ID# CK#				
	ID#				
	ID# CK#				
	· · · · · · · · · · · · · · · · · · ·		SUB-TOTAL	122 20	

TOTAL (if last page of this schedule)

(for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

500,000	WILL COOK				
20000		es e contraction de la contrac	Base (Control		333
3333	8 3890		2 w.w		****
3000	N 22 416	3 444 22	8 88 8	326-22	200000
2000	تكنينين	dudul	6.385.5	6.2.1.2.	338. ·

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

_				
- 18	SCHEDULE			
	D			
	В	MONETARY		
1	(Rev. 07/03)	EXPENDITURES		
\vdash				
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COMMITTEE NAME (Must be same as on Statement of Organization) Wapello Co. Republican sommittee CANDIDATE NAME AND ADDRESS TO WHOM **PURPOSE AMOUNT** DATE **ID NUMBER EXPENDITURE** (DESCRIBE TRANSACTION) EXPENDED **EXPENDED** (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# US Postal Service Howley Store CK# IN 52001 ID# Regional CK# ID# aWhite Shorreld CK# ID# Trudy Caviness 285) Oak Medan CK# Ottumwa ID# Ceeil Kearner 1102 Think Are & CK# Alloia ISA ID# 10 kmea CK# Otherma, DA 5250 ID# 00 CK# ID# CK# 11 rod with SUB-TOTAL \$ 1 0.01 TOTAL (if last page of this schedule)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)							
Napello Co. Republican Central Con mittee							
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED			
(),	ID#	Otherwa Waterwarks	5				
"/1/m	CK#	230 Waterworks Dr. Otturnwe Str 528	Headquarter's	\$ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
121	ID#	Cecil Kearner	.1				
73/07		Cecil Keirnery 1102 Third Alet. Albia, IA 52533	Headquarter's	15000			
121	ID#	Othermus historius					
12/15/07		Scharter works Br. Otherway AA SEO	Water Bill	1868			
121.	ID#		^				
1415/07	CK#	Altiant Energy	Electric Bill	1632			
12/15/on	CK#	Mid Am Energy	Gas Bill	1533			
	ID#						
	CK#						
	ID#						
	CK#	1					
	ID#						
	CK#			ĺ			
			SUB-TOTAL	\$ 211.72			
	\$927.73						

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Page		of	_